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SUBJECT: FOLLOW-UP ON PRESIDENT'S ANNOUNCEMENT TO EXPAND FIGHT AGAINST GLOBAL H1N1 PANDEMIC

¶1. This is an action request. See para five.

¶2. On September 17, 2009, President Obama announced that the United States will act aggressively to stop the global spread of the pandemic 2009-H1N1 virus through partnering with the World Health Organization (WHO) to make 10 percent of the U.S. H1N1 vaccine supply available to vulnerable countries. Other countries are partnering with the United States to act in concert with this effort -- Australia, Brazil, France, Italy, New Zealand, Norway, Switzerland, and the United Kingdom. Similar announcements have been made to date by all except Brazil.

¶3. The President's announcement of September 17 copied below can be found at www.whitehouse.gov.

Begin text.

The White House
Office of the Press Secretary

President Announces Plan to Expand Fight Against Global H1N1 Pandemic

Today, President Obama announced the United States will continue to act aggressively to stop the global spread of the pandemic 2009-H1N1 influenza virus and is prepared to make 10 percent of its H1N1 vaccine available to other countries through the WHO. In recognition that diseases know no borders and that the health of the American people is inseparable from the health of people around the world, the United States is taking this action in concert with Australia, Brazil, France, Italy, New Zealand, Norway, Switzerland, and the United Kingdom. The United States will make the H1N1 vaccine available to the WHO on a rolling basis as vaccine supplies become available, in order to assist countries that will not otherwise have direct access to the vaccine.

This week, the Food and Drug Administration officially licensed the 2009-H1N1 influenza vaccine. Last week, the Department of Health and Human Services and the National Institutes of Health announced that one dose of the vaccine - instead of two doses - will be effective in developing immunity in most adults, and HHS Secretary Sebelius announced the vaccine would be available in the coming weeks, earlier than originally anticipated. We remain confident that the United States will have sufficient doses of the vaccine to ensure that every American who wants a vaccine is able to receive one. We continue to recommend that early priority at home and abroad should be given to pregnant women, health care workers, individuals caring for infants less than 6 months of age, and other high-risk populations.

There is broad international recognition that the 2009-H1N1

pandemic presents a global health risk. Millions of people around the world have been affected, thousands have died and the virus continues to spread across international borders. The United States recognizes that just as this challenge transcends borders, so must our response. We invite other nations to join in this urgent global health effort. Working together, we can ensure that this vaccine limits the spread of the disease, reduces the burden on health care systems, reduces the risk of an even more virulent strain emerging and, most importantly, saves lives -- in the United States and around the world.

End text.

14. **Background.** This initiative grew out of the important recognition of H1N1 as a global health risk, and therefore, of our global responsibility to ensure a collective and common security in an increasingly interdependent world. While other countries have pledged to join us in this effort, we seek additional clarity on the commitments made regarding donation of 10% of respective country vaccine supplies, and/or any other donation intended such as money or technical assistance. Donations can be made in three ways: 1) funding, for vaccine or non-vaccine contributions (such as technical capacity to enable timely delivery in-country); 2) donation of vaccine purchased by the donor government, and/or 3) joining with the United States in an effort to negotiate with the drug industry in order to free up contracted manufacturing capacity so that it can be allocated to the WHO. The question of timing for vaccine delivery is an important factor in our collective response, with earlier delivery being more efficacious against the pandemic.

15. **Action Request.** Posts are requested to approach senior host government officials to ask for more detailed information on vaccine donation or other donation plans, some of whom may have received initial contact from the White House. List of officials contacted is being emailed separately to respective posts. Request post responses by September 23rd. Please slug responses for IO/HS (Blackwood) and OES/IHB (Fantozzi).

16. **Talking Points.**

--Thank you for undertaking to join the United States in a common effort to combat the global H1N1 pandemic.

-- We would like to ensure effective coordination between donors and the WHO and to understand clearly how and when you plan to fulfill your pledge regarding donation of 10% of respective country vaccine supplies, and/or any other donation intended such as money or technical assistance. Inasmuch as such plans may still be under development, we would like to be kept informed of your progress, and intend to share our own.

-- Donations can be made in three ways: 1) pledge of funding for vaccine or non-vaccine contributions (such as technical capacity to enable timely delivery in-country); 2) donation of vaccine purchased by your government, or 3) freeing up manufacturing capacity and encouraging the manufacturers to sell the vaccine made available to WHO at the WHO price, where we would like to pursue your joining with the United States in an effort to negotiate with the drug industry for reduced rate purchases by WHO.

-- We would also like to discuss timing of the vaccine delivery to provide the most efficacious assistance, and we would like to stay in close contact as we formalize our commitments and expand and deepen our conversations with the WHO and manufacturers.

-- The United States will facilitate contacts between relevant officials in the respective governments, as well as WHO, as soon as possible in order to move forward on these commitments. Please provide the names and contact information of officials in your government who should be included in these discussions.

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